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CONFIRMATION NO. 1125

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/775,675	<b>FILING OR 371(c) DATE</b> 02/10/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1624	<b>ATTORNEY DOCKET NO.</b> ORT-1476 (CONT)
<b>APPLICANTS</b> William J. Hoekstra, Chapel Hill, NC; Alexey B. Dyatkin, Maple Glen, PA; Bruce E. Maryanoff, Forest Grove, PA; Jay M. Matthews, Lansdale, PA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/911,605 07/24/2001 PAT 6,713,475 which is a CIP of 09/468,650 12/21/1999 ABN which claims benefit of 60/116,358 01/19/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/11/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 46
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 45511				
<b>TITLE</b> TRICYCLIC BENZODIAZEPINES AS VASOPRESSIN RECEPTOR ANTAGONISTS				
<b>FILING FEE RECEIVED</b> 1454	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	